

Countermeasure and Response Administration



Pandemic Influenza Vaccine Doses Administered Exercise (DAX 2010) Lite

Background

In the event of an influenza pandemic, timely reporting of Pandemic Influenza vaccine doses administered will allow the federal government and Project Areas to closely monitor the use of limited vaccine supplies. Following the 2009 H1N1 vaccine doses administered event and the successful exercises of Fall 2007 and 2008, CDC and Project Areas are planning a short voluntary Doses Administered Exercise for the Fall of 2010 (DAX 2010 Lite).

Why DAX 2010 Lite?

1. To engage and involve Project Areas on reporting and tracking vaccine doses administered.
2. To prepare Project Areas for another pandemic influenza event, if one were to occur.
3. To be proactive to maintain a state of emergency preparedness and readiness.
4. To provide the opportunity for Project Areas to test new or improved system capabilities.
5. To apply the strength of the 2009 H1N1 vaccine doses administered campaign and improve on the identified limitations.
6. To assist states with the transmission of data in the ACIP assigned General Population priority groups as in DAX 2008. The vaccinees are categorized into five tiers:
 - a. Tier 1: Pregnant women, infants and toddlers 6-36 months old
 - b. Tier 2: Household contacts of infants <6 months old
 - c. Tier 3: Children 3-18 years old both with or without high risk conditions
 - d. Tier 4: Persons 19-64 years old with high risk conditions and persons >65 years old
 - e. Tier 5: Healthy adults 19-64 years old
7. To disseminate findings and best practices of vaccine doses administered via reports, presentations, and publications.

Collaborators

- **CDC:** OSELS, NCIRD, OPHPR
- **Project Areas:** Public Health Emergency Preparedness (PHEP) grantees, Immunization Programs and systems
- Selected public sector, seasonal influenza clinic site(s)

Project Area Commitments

- **Number of Clinics and Frequency:** Collect vaccine doses administered data from a minimum of 2 clinics per week for 2 consecutive weeks, making a total of 4 clinics. There is no maximum number of clinics to collect data from.
- **Reporting:** Each Project Area is responsible for submitting aggregate doses administered counts for the reporting period based on the MMWR week (Sunday through Saturday). The deadline for this reporting period is Tuesday at 11:59 pm local time for the reporting jurisdiction.
- **Timeframe:** Beginning Monday, October 25 and reporting final counts on Tuesday, November 09, 2010.
- This is a voluntary exercise with a shorter timeframe and a smaller number of reporting providers.

Expected Challenges

- Staffing resources and time commitments.
- Technical concerns, training and equipment needs.
- Incomplete and inconsistent reporting.



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